	his form, together with	1005 B	P.O. Box 1450 Alexandria, V r <u>Fax</u> (571) 273-288	r for Patents 0 Virginia 22313-1450 5	
INSTRUCTIONS: This for appropriate. All further con indicated unless corrected imaintenance fee notification	rm should be used for transpressioned including the Personal or directed outs with the second	mitting the ISSUE FEE an to Sadvance orders and n is slock 1, by (a) specifyin	d PUBLICATION FEE (if a confication of maintenance fee g a new correspondence add	required). Blocks I through 5 st ces will be mailed to the current ress; and/or (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
	E ADDRESS (Note: Use Block for at 590 08/23/2005	ny change of address)	Note: A certificat Fee(s) Transmittal papers. Each addi have its own certif	e of mailing can only be used fo I. This certificate cannot be used for tional paper, such as an assignme ficate of mailing or transmission.	or domestic mailings of the for any other accompanying int or formal drawing, must
DAVIS & BUJO FOURTH FLOOR 500 N. COMMER MANCHESTER, 1	CIAL STREET		I hereby certify th States Postal Serv addressed to the transmitted to the	Certificate of Mailing or Trans at this Fee(s) Transmittal is being ited with sufficient postage for firit Mail Stop ISSUE FEE-address USPTO (571) 273-2885, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below.
			Gary		(Depositor's name)
			MAG		(Signature)
			/Novemb	er 22, 2005	(Date)
APPLICATION NO.	FILING DATE	FIRST NAM	IED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/827,410	04/19/2004	Timoth	y J. Donohue	DONTIM POLAUS	2586
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/23/2005
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	_	
PATEL,	NIHIR B	3743	128-204150		
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND	dence address (or Change of C 22) attached. tion (or "Fee Address" Indicat or more recent) attached. Use D RESIDENCE DATA TO BE	ion form of a Customer PRINTED ON THE PATE	is OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent o name will be printed. NT (print or type)	names of up to ts. If no name is 3	
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required.	tion (or "Fee Address" Indicat or more recent) attached. Use D RESIDENCE DATA TO BE an assignee is identified bel 1 37 CFR 3.11. Completion of	ion form register 2 register 2 register 2 register 2 register 2 register 3 register 4 register 2 register 5 register 2 register 5 register 2 register 3 register 3 register 3 register 4 register 2 register 3 register 3 register 3 register 3 register 4 register 3 register 4 re	is OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent o name will be printed. NT (print or type)	g as a member a 2 and so of up to ts. If no name is 3 ssignee is identified below, the d	ocument has been filed for
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate in the following fee(s) are issue Fee	tion (or "Fee Address" Indicate or more recent) attached. Use to RESIDENCE DATA TO BE an assignee is identified belin 37 CFR 3.11. Completion of EE e assignee category or categorienclosed:	ion form of a Customer listed, r. 2 register 2 register 2 register 2 register 3 register 4 register 2 register	us OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on name will be printed. NT (print or type) ppear on the patent. If an ante for filing an assignment. NCE: (CITY and STATE OR e patent): Individual of Fee(s): ck in the amount of the fee(s) ent by credit card. Form PTO-	g as a member a 2 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	oup entity
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are Issue Fee Advance Order - # o	tion (or "Fee Address" Indicate or more recent) attached. Use the property of	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 register 4 register 2 register 2 register 2 register 2 register 2 register 3 register 4 register 2 register 4 register 5 register 4 register 5 register 4 register 5	us OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on name will be printed. NT (print or type) ppear on the patent. If an ante for filing an assignment. NCE: (CITY and STATE OR e patent): Individual of Fee(s): ck in the amount of the fee(s) ent by credit card. Form PTO-	g as a member a 2 and go fup to to ts. If no name is 3 ssignee is identified below, the d. COUNTRY) Corporation or other private great is enclosed.	oup entity
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are publication Fee (No s Advance Order - # o Change in Entity Status a. Applicant claims S	tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO BE an assignee is identified bel a 37 CFR 3.11. Completion of EE assignee category or categorienclosed: The assignee category or categorienclosed:	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, respectively. The PATE ow, no assignee data will a f this form is NOT a substitute of this form is NOT a subst	us OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on name will be printed. NT (print or type) uppear on the patent. If an acte for filing an assignment. NCE: (CITY and STATE OR e patent): Individual for Fee(s): us in the amount of the fee(s) ent by credit card. Form PTO- prirector is hereby authorized account Number 04-02 plicant is no longer claiming States.	g as a member a 2 2 3 1 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2	credit any overpayment, to opy of this form).
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are publication Fee (No s Advance Order - # o Change in Entity Status a. Applicant claims S	tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO BE an assignee is identified bel a 37 CFR 3.11. Completion of EE assignee category or categorienclosed: The assignee category or categorienclosed:	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, respectively. The PATE ow, no assignee data will a f this form is NOT a substitute of this form is NOT a subst	us OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on name will be printed. NT (print or type) uppear on the patent. If an acte for filing an assignment. NCE: (CITY and STATE OR e patent): Individual for Fee(s): us in the amount of the fee(s) ent by credit card. Form PTO- prirector is hereby authorized account Number 04-02 plicant is no longer claiming States.	s as a member a 2 2 3 4 5 5 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	credit any overpayment, to opy of this form). FR 1.27(g)(2). ation identified above. he assignee or other party in
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are publication Fee (No s Advance Order - # o Change in Entity Status a. Applicant claims S	tion (or "Fee Address" Indicator more recent) attached. Use of RESIDENCE DATA TO BE an assignee is identified belia of CFR 3.11. Completion of EE e assignee category or categoric enclosed: small entity discount permitted of Copies	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, respectively. The PATE ow, no assignee data will a f this form is NOT a substitute of this form is NOT a subst	us OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on name will be printed. NT (print or type) uppear on the patent. If an acte for filing an assignment. NCE: (CITY and STATE OR e patent): Individual for Fee(s): us in the amount of the fee(s) ent by credit card. Form PTO- prirector is hereby authorized account Number 04-02 plicant is no longer claiming States.	g as a member a 2 2 3 1 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2	credit any overpayment, to opy of this form). FR 1.27(g)(2). ation identified above. he assignee or other party in
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are Issue Fee Advance Order - # o Change in Entity Status a. Applicant claims S The Director of the USPTO HOTE: The Issue Fee and Patterest as shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the USPTO HOTE: The Issue Fee and Patterest as Shown by the recordant of the Issue Fee and Patterest as Shown by the recordant of the Issue Fee and Patterest as Shown by the recordant of the Issue Fee and Patterest as Shown by the Issue Fee and Patterest a	tion (or "Fee Address" Indicator more recent) attached. Use of RESIDENCE DATA TO BE an assignee is identified belia of Topic and assignee category or categorienclosed: Small entity discount permitted of Copies	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, respectively. The PATE ow, no assignee data will a f this form is NOT a substitute of this form is NOT a substit of this form is NOT a substitute of this form is NOT a substitu	is OR, alternatively, name of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on name will be printed. NT (print or type) ppear on the patent. If an ante for filing an assignment. NCE: (CITY and STATE OR e patent): Individual for fee(s): ck in the amount of the fee(s) ent by credit card. Form PTO- pirector is hereby authorized account Number 04-02 plicant is no longer claiming Stany) or to re-apply any prevone other than the applicant; and the patent of the pat	as a member a 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	credit any overpayment, to opy of this form). FR 1.27(g)(2). Attion identified above, he assignee or other party in the control of the cont
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are Issue Fee Advance Order - # o Change in Entity Status A Applicant claims S The Director of the USPTO Hoters as shown by the record Authorized Signature Typed or printed name Typed or printed name Typed or printed name Authorized Signature — Typed or printed name Typed or Alexandria, Virginia 22313	tion (or "Fee Address" Indicator more recent) attached. Use or more recent attached. It is an assignee is identified belt and saving a sassignee category or categoric enclosed: It is assignee category or categoric enclosed: It is required to apply the Issue or is required by 37 CFR 1.31 ity is governed by 35 U.S.C. os for reducing this burden, she initia 22313-1450. DO NOT S	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, respectively. The particular on the particular on the payment of this form is NOT a substitute of this form is NOT as the payment of this form is NOT as the p	is OR, alternatively. Is or, alternatively. Is mame of a single firm (having ed attorney or agent) and the ered patent attorneys or agent on ame will be printed. In or type) In or type) In or type In or t	as a member a 2 anames of up to 15. If no name is 3 assignee is identified below, the discount of the country o	credit any overpayment, to opy of this form). FR 1.27(g)(2). Ition identified above. the assignee or other party in the complete assignee or other party in gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate in the following fee(s) are publication Fee (No see Indicated Indicat	tion (or "Fee Address" Indicator more recent) attached. Use or more recent attached. It is an assignee is identified belt and saving a sassignee category or categoric enclosed: It is assignee category or categoric enclosed: It is required to apply the Issue or is required by 37 CFR 1.31 ity is governed by 35 U.S.C. os for reducing this burden, she initia 22313-1450. DO NOT S	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, response on assignee data will a f this form is NOT a substitute of this form is NOT as the substitute of this form is required to respond to a substitute of this form and trademark of fice. 1. The information is required to respond to a substitute of this form and trademark of fice.	is OR, alternatively. Is or type) Is or type	as a member a 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	credit any overpayment, to opy of this form). FR 1.27(g)(2). Intion identified above, the assignee or other party in the complete artment of Commerce, P.O. for Patents, P.O. Box 1450, I number.
"Fee Address" indica PTO/SB/47; Rev 03-02 Number Is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN Please check the appropriate a. The following fee(s) are some set of the last of the	tion (or "Fee Address" Indicator more recent) attached. Use or more recent at an assignee is identified belt and of the assignee category or categoric enclosed: In a sasignee is identified belt in a sasignee category or categoric enclosed: In a sasignee is identified belt in a sasignee category or categoric enclosed: In a sasignee is identified belt in a sasignee category or category or category enclosed: In a sasignee is identified belt in a sasignee category or category or category enclosed: In a sasignee is identified belt in a sasignee category or category enclosed: In a sasignee is identified belt in a sasignee category or category enclosed: In a sasignee is identified belt in a sasignee category or category enclosed: In a sasignee is identified belt in a sasignee category or category enclosed: In a sasignee is identified belt in a sasignee category or category or category enclosed: In a sasignee is identified belt in a sasignee category or category o	ion form of a Customer legister 2 register 2 register 2 register 2 register 3 registed, response on assignee data will a f this form is NOT a substitute of this form is NOT as the substitute of this form is required to respond to a substitute of this form and trademark of fice. 1. The information is required to respond to a substitute of this form and trademark of fice.	is OR, alternatively. Is or type) Is or type	as a member a 2 mames of up to 15. If no name is 3 ssignee is identified below, the discount of the private group is enclosed. COUNTRY) Corporation or other private group is enclosed. 2038 is attached. by charge the required fee(s), or 13 (enclose an extra control of the private group is enclosed. SMALL ENTITY status. See 37 Consulty paid issue fee to the applicate a registered attorney or agent; or the private group is to the public which is to file (and 17 ademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is and Trademark Office, U.S. Dep RESS. SEND TO: Commissioner is sit displays a valid OMB control is control is sit displays a valid OMB control is control is sit display	credit any overpayment, to opy of this form). FR 1.27(g)(2). Intion identified above, the assignee or other party in the complete artment of Commerce, P.O. for Patents, P.O. Box 1450, I number.

Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE ollection of information unless it displays a valid OMB control number.

Origin the Faparwork Housellan Not of 1000, in	Application Number	10/827,410	mation unless it displays a valid office control vicinistic					
	Filing Date	April 19, 2004						
TRANSMIL	April 13, 20							
TRANSMITTE 420 FORM 25 2005	First Named Inventor	Timothy DON	OHUE					
(to be used for all correspondence after initial filing)	Group Art Unit 3743							
TO FRADENIE	Examiner Name Nihir B. PATEL		L					
Total No. of Pages in this Submission: 2	Attorney Docket Number	DONTIM PO1AUS						
ENCLOSURES (check all that apply)								
■ Fee Transmittal Form	☐ Assignment papers (for an Application)		☐ After Allowance Communication to Group					
■ Fee attached	□ Drawing(s)		☐ Appeal Communication to Board					
☐ Amendment/Response	-		of Appeals and Interferences					
☐ After Final	☐ Licensing-related Papers		☐ Appeal Communication to Group					
☐ Affidavits/declaration(s)	☐ Petition Routing Slip (PTO/SB/69) and Accompanying Petition		(Appeal Notice, Brief, Reply Brief) Proprietary Information					
☐ Extension of Time Request (in Duplicate)	 □ To Convert a Provisional Petition □ Power of Attorney, Revocation Change of Correspondence Address □ Terminal Disclaimer □ Small Entity Statement □ Request for Refund 		☐ Status Letter ☐ Additional Enclosure(s) (please identify below): Postcard					
☐ Express Abandonment Request								
☐ Information Disclosure Statement								
☐ Certified Copy of Priority Document(s)								
□ Response to Missing Part/s								
Incomplete Application								
☐ Response to Missing Parts under 37 CFR 1.52 or 1.53								
REMARKS								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm or Individual Name Gary D. CLAPP Reg. No. 29,055								
DAVIS & BUJOLD, P.L.I.C. CUSTOMER NO. 020210								
Signature								
Date November 22, 2005								
Date November 2		UING						
CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 22,								
2005.	200							
Type or printed name Gary D. CLAPB								
Signature			Date: November 22, 2005 (Ifb)					